## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

748061

(9)

Mailing Address

## BAYWOOD COLONY SOUTHWOOD APARTMENTS I CONDOMINIU M ASSOCIATION, INC.

STE ES		STE E3						
Sarasota Fl 34233 US		Sarasota FL 34233-1505 US			3. Date Incorporated or Qualified 07/12/1979	3a. Da	05/01/19	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For			plied For
21		26			65-0053218		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
22		27	<del></del>				Fee Re	quired
City & State		City & State	¬ '		6. Election Campaign Financing \$5.00 May Be			
Zip Country		28 7in	Zip Country		Trust Fund Contribution Added to Fees			
	25	29	30	uy	B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
			Name					
MONT CONCEPTS OF SARASOTA COUNTY INC								
5550 BEE RIDGE RD			1	32 Street A	ddress (P.O. Box Number is Not Acceptab	le)		
STE E3			1	33		<del></del>		
SARASOTA FL 34233			1					
Unitro	71A 1 E 01200		Į.	34 City		FI	<b>85</b>   Zip (	Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment a agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							f changing it pointment as	s registered registered
agent. I ai	m tamiliar with, and accept the oblig	ations of, Section 617.0503, Flo	orida Statu	tes.				
SIGNATURE	Signature, typed or printed name of registered age	and and the Manadashia (NO)	C - D - Intered	A almost	equired when reinstating)	DATE		
12.		ID DIRECTORS	13.	Agent signature r	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TITLE	PD	DELETE	1.1 1111	E			Change	Addition
NAME	COSTELLO, HERB		1.2 NA	1			_ •	
STREET ADDRESS	1711 SOUTHWOOD STREET	•	1.3 ST	EET ADDRESS				
CITY-ST-ZIP	SARASOTA FL		•	Y-ST-ZIP				
TITLE	D	DELETE	2.1 1111				Change	Addition
NAME	CICAK, FEDOR		22 NAJ	AE				
. STREET ADDRESS	1603 SOUTHWOOD ST.		2.3 STF	EET ADDRESS				
CITY-ST-ZIP	SARASOTA FL		2, 4 Ci	Y-ST-ZIP				
TITLE	SD	DELETE	3.17(1)	E	VD		Change	☐ Addition
NAME	EMRICH, JAN		3.2 NAI	AE .				
STREET ADDRESS	1705 SOUTHWOOD ST		3.3 STR	EET ADDRESS		-		
CITY-ST-Z#P	SARASOTA FL			Y-ST-ZIP		771		
TITLE	TD	★ DELETE	4.1 (1)	.E	SD		☐ Change	X Addition
NAME	GAGNE, RICHARD		4, 2 NA	ME	Zlotolow, Pauline			
STREET ADDRESS			4.3 S1F	EET ADDRESS	1605 Southwood Street			
CITY-ST-ZIP	SARASOTA FL			Y-ST-ZIP	Sarasota, FL 3423	1	22	
TITLE	VD	DELETE	51 111	ľ	TD		Change	☐ Addition
NAME	BRYD, RICHARD		5.2 NA			i.		
STREET ADDRESS	6512 SUPERIOR ST			FET ADDRESS		Ì		İ
CITY-ST-ZIP	SARASOTA FL	T prices		Y-ST-ZIP			1 0	
TITLE	. •	☐ DELETE	6.1 TITI				Change	☐ Addition
NAME			6.2 NA	1			•	
STREET ADDRESS			6.3 STF	EET ADDRESS				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**FILED** 

Apr 25 1997 8:00am

Secretary of State

## ADDITIONAL MEMBERS

TITLE: D

NAME: Tupper, Charles STREET ADDRESS: 3319 Tallywood Court

CITY-ST-ZIP: Sarasota, FL 34237

ADDITION